ALLOWANCE HOT LIST

Appl. No.	10/017,893 May	Prepared by	1-3-05
Dxammor 10			
JACKET:			
YES NO I	Primary Examiner box complete. ssuing Classification complete.		
PTO-892/144	9:		•
YES NO E YES NO D	xaminer's initials or cross-through ate(s) supplied/complete on all PT	lines supplied for the control of th	or each item cited by applicant. eets. (Month and year required.)
SPEC: YES NO YES NO	Brief Description of Drawings inc Continuing data is mentioned in 1	cludes descriptions of the second strains of the second strains of the second s	on of each figure in drawings. an be an insert.)
	laims listed on Notice of Allowabi laims correctly numbered in index (No duplicate or missing o (No incorrect dependencie	laim numbers.)	ved claims and/or index of claims.
CRFE: YES NO	If necessary (biological sequence	listing).	
NOTICE OF ALLOWABILITY:			
YES NO Eit	ther Box No. 3 (drawings accepted en checked.) or Box No. 8	(corrected drawing request) has